



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

RQ-2

Sarah M. Brown, Treasurer
Ohio Republican State & Central
Executive Committee
211 S. Fifth Street
Columbus, OH 43215

OCT 25 2000

Identification Number: C00162339

Reference: July Quarterly Report (4/01/00-6/30/00)

Dear Ms. Brown:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. The review raised questions concerning certain information contained in the report(s). An itemization follows:

-Schedule B supporting Line 29 of your report (pertinent portion attached) discloses \$93,852.90 in transfers to what appears to be your non-federal account to "correct state alloc". You are advised that 11 CFR §102.5 prohibits a non-federal account from financing activity in connection with federal elections. Please provide clarifying information regarding these corrections including the date(s) when the original activity was conducted by the non-federal account if this was the case.

-Itemized disbursements must include a brief statement or description of why the disbursements were made. Please amend Schedule H4 of your report to clarify the following description(s): "Consulting fees". For further guidance regarding acceptable purposes of disbursements, please refer to 11 CFR §104.3(b)(3).

-Line 21(a)(i) of the Detailed Summary Page of your report discloses a total of \$535,737.60 in the federal share of allocable expenses. The sum of the entries itemized on Schedule H4, however, indicates the total to be \$560,891.24. Please amend your report to clarify the discrepancy.

-Line 21(a)(ii) of the Detailed Summary Page of your report discloses a total of \$691,780.03 in the non-federal share of allocable expenses. The sum of the entries itemized on Schedule H4, however, indicates the total to be \$706,739.77. Please amend your report to clarify the discrepancy.

-Please amend your report by providing the purpose for each disbursement itemized on Schedule H4 supporting Line 21(a).

-Please amend your report by providing the full address for each attached memo entry for credit card transactions for schedule H4 supporting line 21(a).

-Please clarify all expenditures for "GOTV Activities". In addition, if any of the get-out-the-vote activities referenced House or Senate candidates, they should be allocated accordingly, unless merely incidental to the overall activity. If a portion or all of these expenditures were made on behalf of federal candidates, they should be reported on Schedules B, E or F for Lines 23, 24 or 25 of the Detailed Summary Page, as appropriate.

-2 U.S.C. §434(b)(3) requires itemization of contributions from individuals and persons other than political committees, where the aggregate total from the contributor exceeds \$200 in a calendar year. In addition, 11 CFR §104.3(a)(2)(i)(B) requires a committee to report the total amount of unitemized contributions (see Line 11(a)(ii) of the Detailed Summary Page). If a committee wishes to disclose contributions regardless of the amount contributed, the committee must separate (on separate receipt schedules) those contributors requiring itemization from those who are not required to be itemized. 11 CFR §104.3(a)(4)(i) For future filings, please submit your reports in this order.

A written response or an amendment to your original report(s) correcting the above problem(s) should be filed with the Federal Election Commission within fifteen (15) days of the date of this letter. If you need assistance, please feel free to contact me on our toll-free number, (800) 424-9530 (at the prompt press 1, then press 2 to reach the Reports Analysis Division). My local number is (202) 694-1130.

Sincerely,

Adriane Lavender

Adriane Lavender
Reports Analyst
Reports Analysis Division

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	1	1
FOR LINE NUMBER 29		

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

FEC ID No. C00152339

OHIO REPUBLICAN STATE & CENTRAL EXFC COMM

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement correct state alloc	Date (month, day, year)	Amount of Each Disbursement
Ohio Republican Party State Victory Account 211 S. Fifth Street Columbus, OH 43215	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) CORRECT	04-25-00	53250.00
B. Full Name, Mailing Address and ZIP Code Ohio Republican Party State Victory Account 211 S. Fifth Street Columbus, OH 43215	Purpose of Disbursement correct state alloc Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) CORRECT	06 30 00	40602.90
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement

SUBTOTAL of Disbursements This Page (optional)

93852.90

TOTAL This Period (last page this line number only)

93852.90

